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26111 7590 10/13/2009						have its own certificate of mailing or transmission.				
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APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR		<b>E</b>	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/632,799 08/04/2003 Jie Cheng 2140.0020001 5549 TITLE OF INVENTION: OPTIMIZED AUCTION COMMODITY DISTRIBUTION SYSTEM, METHOD, AND COMPUTER PROGRAM PRODUCT										
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$	1510	\$0		\$0		\$1510	01/13/2010	
EXAMINER		ART UNIT		CLASS-SUBCLASS	S					
AIRAPETIAN, MILA		3625		705-026000		-				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Power Information Network, LLC  Westlake Village, California  Please check the appropriate assignee category or categories (will not be printed on the patent):										
Please check the appropriat	te assignee category or	categories	(will not be pr	inted on the patent):		Individual 🔼 Co	rporatio	on or other private gro	up entity  Government	
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies				<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0036 (enclose an extra copy of this form).</li> </ul>						
5. Change in Entity Statu	•			<b>D</b>						
a. Applicant claims S  NOTE: The Issue Fee and I						<u> </u>		ITY status. See 37 CF		
interest as shown by the rec	cords of the United Stat	es Patent a	and Trademark	Office.	iair c	are applicant, a regi	acred a		assignee of other party in	
Authorized Signature		1.	Ha	ian		Date	nen	nber 10,20	009	
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